09/456,877

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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Application Number

## **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Filing Date December 8, 1999 First Named Inventor Masahiro SHIMIZU Art Unit 2837 Examiner Name M. T. Fletcher Attorney Docket-Number 393032015900

Total Number of Pages in This Submission		sion	Attorney Docket Numb	er 393032015900		
ENCLOSURES (Check all that apply)						
Fee Transmittal Form		Drawing(s)		After Allowance Communication to TC		
Fee /	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences		
Amendmer	nt/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After	Final	Petition to Co Provisional A		Proprietary Information		
Affida	avits/declaration(s)		ney, Revocation rrespondence Address	Status Letter		
Extension of	of Time Request	Terminal Disc	claimer	X Other Enclosure(s) (please Identify below):		
Express At	pandonment Request			copies of 2 foreign patent publications		
x Information	Disclosure Statement	CD, Number	of CD(s)			
Certified Co	opy of Priority s)	Landscape Table on CD				
	issing Parts/ Application	Remarks				
Reply to Missing Parts under 37 CFR 1.52 or 1.53						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm Name MORRISON & FOERSTER LLP (Customer No. 25224)						
Signature	Nal I.					
Printed name	David L. Fehrman					
Date			Reg. No.	28,600		
L	December 6, 2006 28,600					
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  Dated: December 6, 2006  Signature:  (Melody Y. Green)						

2837

DEC 1 2 2006

PTO/SB/17 (01-06) Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known suant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 09/456,877 **Application Number** FEE TRANSMITTAL December 8, 1999 Filing Date Masahiro SHIMIZU For FY 2006 First Named Inventor M. T. Fletcher **Examiner Name** 2837 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 393032015900 TOTAL AMOUNT OF PAYMENT 180.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) None Other (please identify): Check Credit Card Money Order x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x | Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity Small Entity** Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 300 500 250 200 100 0 Utility 150 0 130 65 200 100 100 50 Design 150 160 80 0 200 100 300 Plant 600 300 Reissue 300 150 500 250 0 200 100 O 0 0 0 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 200 Each independent claim over 3 (including Reissues) 100 180 360 Multiple dependent claims **Multiple Dependent Claims** Fee Paid (\$) **Total Claims** Extra Claims Fee Paid (\$) Fee (\$) - 20 = 0 HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims Extra Claims 0 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Fee (\$) Extra Sheets Total Sheets 0 (round up to a whole number) x - 100 = Fees Paid (\$) 4. OTHER FEE(S) 0 Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00

SUBMITTED BY	N 27	\				
Signature	land to		Registration No. (Attorney/Agent)	28,600	Telephone	(213) 892-5601
Name (Print/Type)	David L. Fehrman				Date	December 6, 2006

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MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: December 6, 2006 Signature: (Melody Y. Green)

Patent Docket No. 393032015900

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Reissue Application of: Masahiro SHIMIZU

Serial No.: 09/456,877

Filing Date: December 8, 1999

For: TONE WAVE FORM GENERATING

METHOD AND APPARATUS BASED

ON SOFTWARE

Examiner: M. T. Fletcher

Group Art Unit: 2837

## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. §1.97 and § 1.98, Applicant submits for consideration in the above-identified application the documents listed on the attached Form PTO/SB/08a/b. Though all of the listed documents were submitted in the original case, i.e. Patent No. 5,696,342, copies of the foreign documents are submitted herewith. The Examiner is requested to make these documents of record.

The documents listed on the attached Form PTO/SB/08a/b were cited in the enclosed Singapore search reports, directed to two counterpart international applications and have not been previously cited.

12/12/2006 RFEKADU1 00000056 031952 09456877 01 FC:1806 180.00 DA

la-893301

This Information Disclosure Statement is submitted:

$\boxtimes$	After	receipt of a first Office Action on the merits but before mailing of a final Office Action			
	or Not	ice of Allowance.			
		A fee is required. A check in the amount of is enclosed.			
	$\boxtimes$	A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to			
		this submission in duplicate.			

Applicant would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicant petitions for any required relief including extensions of time and authorize the Director to charge the cost of such petition and/or other fees due in connection with the filing of this document to **Deposit Account No. 03-1952** referencing 393032015900.

Dated: December 6, 2006

Respectfully submitted,

David L. Fehrman

Registration No.: 28,600

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Complete if Known Substitute for form 1449/PTO 09/456,877 Application Number December 8, 1999 INFORMATION DISCLOSURE Filing Date Masahiro SHIMIZU First Named Inventor STATEMENT BY APPLICANT 2837 Art Unit (Use as many sheets as necessary) M. T. Fletcher Examiner Name 393032015900 Sheet of 1 Attorney Docket Number

	U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Document Number  Number-Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
	1.	US-5,376,752	12-27-1994	Limberis et al.			
	2.	US-5,319,151	06-07-1994	Shiba et al.			
	3.	US-5,029,120	07-02-1991	Brodeur et al.			
	4.	US-5,553,011	09-03-1996	Fujita et al.			

		FOREI	GN PATENT	DOCUMENTS		
Examiner Initials*	Cite No.1	Foreign Patent Document  Country Code³ -Number⁴-Kind Code⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
	5.	EP-0 376 342 A2	07-04-1990	Casio Computer Company Limited		1
	6.	EP-0 463 409 A2	01-02-2002	Casio Computer Company Limited		1

\*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at <a href="https://www.uspto.gov">www.uspto.gov</a> or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁴ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²		

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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Examiner	Date	
Signature	 Considered	

<sup>&#</sup>x27;Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.